

Gertie Courtney

Town

County

MARYLAND

Died at

Hermannville St. Marys

Month

Day

Y.

M.

D.

Native of

Occupation

Date 19

02

Sept

13

Age

3

years

Widow

Divorced

~~Male~~

White

Married

Female

Colored

Single

Widower

Number of children living

Husband
of _____

Wife

Father's
Name

James Courtney

Mother's

Maiden Name

Alice Dossay.

Cause of

Primary

How long sick

Death

Immediate

Bright Disease

About four weeks

Accident, Suicide, Homicide

Reported by

120

Address

Pearson Post Office Maryland.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Mary M. Herbert

Town

County

Died at Mechanicsville

St. Mary's

MARYLAND

Date 1902	Month Sept.	Day 29 th	Y. 1	M.	D.	Native of Ind.	Occupation
Male	White		Married			Widow	Divorced
Female	Colored		Single			Widower	Number of children living

Husband of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Cholera Infantum

Death

Immediate

Exhaustion

105

How long sick

3 wks.

~~Accident, Sudden, Homocid~~

Reported by

Zach. R. Morgan, M.D.

Address

Mechanicsville [redacted] Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Jefferson Jenifer

Town

County

Died at Mechanicsville

St. Marys

MARYLAND

1902

Month Sept.

Day 24

Y. M. D.

Native of

Date 189

Male

Wife

Age 6 days

Widow

Occupation

Female

Colored

Married

Divorced

Single

Widower

Number of children living

Husband
of

Wife

Father's

Name

John Jenifer

Mother's
Name

Gertrude Jenifer

Cause of

Primary

How long sick

Death

Immediate

of worms

Accident, Suicide, Homicide

Reported by

Rev. Joseph

J. Bryant

Address

Charlotte Hall

St. Marys Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Died at		Town	County				
Date 19	02	Month	Day	Y.	M.	D.	
Male		White	Age 24	19	Native of		Occupation
Female		Colored	Married	Widow	Divorced		
Husband of				Number of children living			
Wife							
Father's Name		John Young		Mother's Maiden Name	Mary E. Jefferson		
Cause of Death		Primary Chronic Gastritis		Secondary Acute		How long sick	
Death		Immediate Pulmonary Haemorrhage				Accident, Suicide, Homicide	
Reported by		Rott. F. Palmer M.D.					
Address		Palmer's		[Redacted]		[Redacted] m.d.	

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

